



Questions and Answers regarding UC-CNA negotiations and the union's call for a strike vote

CNA has sent UC nurses a variety of information concerning the current negotiations and the union's call for a strike vote. UC views much of the union's information as inaccurate, a distortion of UC's proposals and what is occurring in bargaining, and an attempt to distract nurses and the public from the real issues. It is critical that nurses understand the implications of such a vote so they can make an informed choice about whether to vote in favor of the University's current contract offer, or whether they should vote to strike. Below are answers to some important questions that UC nurses have been asking.

Q. I've heard that CNA has called for a "strike vote." What does this mean?

A. A "strike vote" means that union members take a vote as to whether or not they want to authorize the union to call a strike at this time or any time until the negotiations are completed.

Q. Will I get another chance to vote before the union actually calls a strike?

A. Unless the union makes some specific commitment to allow nurses to vote again, the upcoming strike vote may be the only one taken. The union is not legally required to submit any future UC offer for a vote.

Q. What is the UC currently offering in terms of pay increases?

A. UC is offering significant market-based salary increases that will help with the recruitment and retention of qualified nurses to all UC medical facilities. UC's salary increases proposed at **UCLA is an increase of 8% to 12% over two years for career nurses which includes an across-the-board increase along with recognition of years of experience.**

Q. If I choose to accept UC's offer, when will I receive my pay increase?

A. Salary increases would be effective on the first day of the first payroll period following nurse ratification of the contract. This could be in July 2005 if UC nurses ratify the University proposal currently on the table.

Q. How would a strike affect my pay increase?

A. The University's proposal states that if the union takes an action that results in a loss of revenue and/or an increase in expenses at any University facility, some or all salary 2005 increases will be delayed for a time commensurate with the revenue lost or expenses incurred by the University. Thus, if the union does strike, salary increases may be delayed for a length of time necessary to recover the lost revenues or extra costs of the strike.

Q. Am I permitted to talk to my supervisor or unit manager about any of this?

A. Absolutely. Your manager is another resource for you to obtain answers about UC's current offer. Your manager is not, however, allowed to discuss with you how you should vote. How you vote is up to you so be sure to get *all* the facts.

Q. Have UC nurses ever held a strike?

A. No. There has never been a nursing strike in the 21 years that UC nurses have been represented by CNA.

Q. Do all UC nurses get to vote?

A. No. A UC nurse must be a dues-paying union member to vote. How the majority of those nurses vote will determine whether or not the union calls a strike that would affect all UC nurses at all locations. However, if you are not a dues-paying member and you do not support a strike, you have the right to express your views to the union.

Q. If a strike is called, will I be able to come to work?

A. Yes. Under the labor laws, employees are free to make up their own minds about whether or not to cross a picket line and continue to work. However, most unions have the right to levy fines against members who choose to work during a strike. UC will not deduct union fines from paychecks or collect fines for the union. Unions are legally prohibited from threatening or coercing members in other ways to keep them from coming to work. You may check CNA's constitution and by-laws to learn what actions CNA can take against nurses who choose to not follow the union's decision.

Q. What happens if the union calls a "one-day" strike?

A. First, the union cannot legally call one-day strikes for the sole purpose of pressuring UC at the bargaining table.

Second, a one-day strike could have a bigger impact on the facility and staff than may be obvious. Specifically, the hospital must begin to decrease census one week prior to the strike date and then gradually increase census back to normal, which may take another week for a total of two weeks. This could mean denying critical and elective patient care for approximately two weeks and reducing the work force accordingly in those units with reduced census. Referral from outlying communities may be lost indefinitely, damaging the public trust in our medical facilities. Critical trauma patients may need to be diverted to non-level I facilities, which reduces the quality of patient care.

Further, the University may choose to employ replacement nurses to care for patients in the event of a strike. The agencies that represent replacement nurses often require a minimum time commitment to send RNs to hospitals. Thus, if an agency requires the University to take replacement RNs for a minimum of three days, the ability to re-employ UC RNs while the replacements are working may be limited.

Q. CNA alleges that UC will start charging UC nurses 8% of salary for retirement in July 2007: Is this true?

A. No. The CNA statement regarding the UCRP is completely misleading. UC has guaranteed in writing that it will **not** increase employee contributions or change the structure of the retirement program for the duration of the contract – through June 2007. Further, as the University informed CNA at the bargaining table, it is not contemplating any changes to the structure of the retirement program for current employees.

While the University is beginning a review of the retirement program to determine what, if any, actions are most appropriate to best ensure its financial stability and viability, **NO** decisions have been made regarding any increases to employee or employer contributions to the UCRP. Any recommendations about the structure of the program and the employer/employee cost for the program

will be reviewed involving faculty and staff (including staff unions), and the communication process will be extensive and open.

Q. CNA alleges that the University will triple employee costs for health coverage over the next few years. What is the truth of this statement?

A. UC has a long and proud tradition of providing some of the best and most comprehensive health benefits to employees and UC is committed to continuing this practice, because we know how important affordable healthcare is to our employees. While it is inevitable that program costs will increase in the future, at this time UC does not know what future costs may be. However, UC will continue to balance the health coverage and costs in a manner that will keep employee costs as reasonable and market-competitive as resources allow.

Q. Why is UC proposing to give nurses a PTO option? How does it work?

A. UC is proposing that all current medical center nurses be given the option to participate in a Paid Time Off (PTO) program or remain on the current vacation/sick leave policy. The PTO program is designed to give nurses the ability to better manage their own time. No nurse will be required to participate in the PTO plan; it is strictly voluntary, although once a nurse chooses PTO, the selection cannot be changed back to the traditional sick/vacation program which will remain in place. CNA has refused to allow UC nurses the opportunity to choose PTO, although the union has agreed to PTO for many other nurses at other medical centers.

Q. Is the University refusing to bargain over lift matters?

A. No, UC has included many of CNA's issues regarding lift into the contract proposal. UC is considering many ways to solve lift-related matters, including lift teams, and is aggressively pursuing these alternatives in an effort to assist nurses in the physical aspects of their jobs. These alternatives, when combined with proper training, will address concerns about physical injury for all employees, not just nurses. However, the UC cannot promise the implementation and continuation of 24-hour lift teams exclusively.

Q. Is the University refusing to negotiate about ratios or fighting against the ratio rules?

A. UC has always been dedicated to proper staffing for the care of our patients and protection of our employees, and we will continue to follow all current laws governing nurse-to-patient ratios, while providing nurses with the maximum flexibility with their own schedules. CNA has demanded that parts of the law and/or guidelines be included into the contract. However, this is an unnecessary measure since UC must already abide by the laws. Further, contrary to CNA's allegations, UC has not taken a position against the implementation of the ratio legislation.

Q. Why has the University refused to pay penalties for nurses missing breaks and lunches?

A. Patient care involves much individual discretion on the part of professional nurses. UC told CNA that if it were to pay penalties for missed breaks and lunches, the University would be required to implement strict scheduling rules for break and lunch periods, in order to ensure against cost increases.

:: :: ::